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ABSTRACT

Needs assessments are conducted with the expectation that the information obtained will be used to make rational decisions. A prior review of the anticipated utilization of needs assessment data and evaluation of the appropriateness of such utilization may prevent inefficient use of resources. A structured interview was developed to evaluate the willingness and ability of community mental health leaders to use data which would be obtained by a needs assessment. Interviews were conducted with five mental health agency administrators and the director of a mental health planning board to ascertain how they would use future needs assessment data. All respondents indicated that the results would not influence service delivery patterns. Agency administrators viewed assessment data primarily as a means of justifying existing services and of obtaining funds for the expansion of services. Several barriers to the contructive use of needs assessment data were identified. (Author/NRB)

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Assessing the Need for a Needs Assessment

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Assessing the Need for a Needs Assessment

In recent years, advances have been made in several methods which have as their aim the improvement of some aspect of community life. Community interventions such as program evaluation, consultation, community organization, and needs assessment have been applied in a variety of settings to a variety of problems. Clearly, different types of community problems suggest different types of community interventions (Davis & Markman, 1980). Knowing when to use what method, however, has remained for the most part an unsystematic process. A more systematic approach towards selecting the appropriate intervention for the appropriate problem may enhance the efficacy of that intervention.

Needs assessment is a method which provides a case in point. Needs assessments are generally conducted with the expectation that the information obtained will be used to make rational decisions. As many researchers and community practitioners have noted, however, appropriate planning and service delivery decisions do not always flow from needs assessment information. This occurs despite often considerable expenditure of time, money, and effort. Numerous factors interfering with the constructive use of assessment data have been identified. These include: lack of fit between expected and obtained data, organizational inertia, concern over the consequences of change, pressure from sources other than consumers of needs assessment, and the inability to see the relationship between results and subsequent courses of action (Siegel, Attkisson, & Carson, 1978; Davis & Salasin, 1975).

A number of activities conducted prior to a needs assessment may

prevent inefficient use of resources. These activities include: definition of the community's concerns, assessment of the anticipated uses of needs assessment data, and evaluation of the appropriateness of these uses. Moreover, these processes could highlight the changes required to facilitate constructive use of the information. The purpose of the present study was to develop and implement a methodology for assessing the need for a needs assessment in a rural midwestern community.

Method

Setting/Participants

During the fall of 1979, a university based community consultation team (CCT), of graduate students and faculty, was contacted by the director of the local mental health planning (648) board with a request for consultation in the area of needs assessment.

The 648 board controls the allocation of a substantial portion of the funding of the five mental health agencies which serve the community. The board's responsibilities include: determining mental health needs; planning and coordinating mental health services; insuring the establishment of appropriate facilities and programs; and, monitoring, reviewing, and evaluating programs to insure needs are being met. Thus, the director's request was based on a commitment to planning mental health services on the basis of community needs.

Ostensibly, such information regarding needs, had been obtained in a needs assessment conducted in 1977 utilizing citizen's survey, key informant, & social indicators approaches. However, serious questions had been raised as to the usefulness of this information. Additionally, little effort had been made to integrate the findings into planning pro-

cedures. The director contacted the CCT to determine whether there was a need for a new needs assessment.

The CCT, at the time of the director's request, had been in existence for approximately one year. The request was viewed by the team as an opportunity to increase its knowledge and understanding of the county's mental health system, and also to build the team's credibility as an agent of the community.

Materials

The goal of the study was to determine whether a needs assessment represented an appropriate intervention for the community at that point in time. Towards this end a structured interview was developed. The instrument included a series of close-ended and open-ended questions. The questions tapped into several dimensions relevant to the evaluation of the need for a needs assessment. These dimensions and the manner in which they were assessed are described below.

1. The attitudes of the mental health leaders towards and impact of a prior needs assessment. As Sarason (1977) has noted, the history of earlier community interventions can provide a basis for predicting attitudes and responses to future intervention. "Attitudes towards and impact of the prior needs assessment" were measured by five point Likert scales ranging from very negative to very positive and by responses to open-ended questions.

2. The types of information mental health leaders are interested in obtaining. Needs assessment methods respond to many but not all questions raised by the mental health system. The need for a needs assessment is, in part, based on the particular types of questions

of interest to mental health leaders. "Types of information desired" was assessed by five point Likert scales ranging from not useful to very useful for each of 13 areas commonly covered by needs assessment, and by responses to open-ended questions.

3. The ability of mental health leaders to use needs assessment information. Mental health leaders may be knowledgeable of and interested in using needs assessment, but may be restricted in doing so by funding, administrative, and legal considerations.

4. The willingness of mental health leaders to use needs assessment information. Lack of understanding, and resistance to empirically based approaches suggest the importance of educative and community-centered intervention prior to the implementation of a needs assessment. "Ability and willingness to use needs assessment data" were assessed by providing specific hypothetical findings that could emerge from a study (e.g., "90% of the key informants in the county view alcoholism as a major mental health problem..."; "the northern part of the county is not using your services yet has the highest need for your services as measured by social indicator data"). Respondents were then asked what they could do and what they would actually do given this information.

5. Attitudes towards future needs assessment. Needs assessment interventions conducted without the support of the mental health system and community are likely to have less impact on the community. "Attitude towards a future needs assessment" was measured by a five point Likert scale.

Procedure

During the fall of 1979, five mental health agency administrators and the director of the mental health planning board were contacted by three members of the CCT and interview dates were established. All six members of the target group were interviewed and the interviews were recorded on audiotapes. Following the interviews, each CCT interviewer coded the interviews that s/he had conducted. These data were then pooled and analyzed for each individual respondent and for the agency administrator group as a whole.

Results and Discussion

Agency Administrators

Table 1 presents the responses of the agency administrators to close-ended questions. This information along with information obtained from open ended questions is summarized below.

Insert Table 1 about here

Attitudes towards and impact of previous needs assessment. The administrators reported a lack of knowledge about the prior needs assessment with respect to the data on which the assessment was based, and the results of the assessment itself. This lack of knowledge may reflect problems in the dissemination of the needs assessment results and/or agency disinterest in the results.

Agency administrators also differed in the uses they reportedly made of the needs assessment information. Two administrators indicated that they had used the information for limited program planning; one

reported using information to justify existing services; and two indicated that the information was not at all useful. The poor use of prior needs assessment data may follow from a number of factors: ineffective dissemination of this information, questions regarding the validity of the data, hostility towards the 648 Board, and/or a view of the information as inconsistent with the goals and plans of the agency.

The attitude of the administrators to the prior needs assessment was generally unfavorable. They indicated that the assessment provided little in the way of new information and lacked implications for planning. They also saw it as another burden imposed by the 648 Board.

Information desired. As indicated in Table 1, there was great variation across respondents in information desired. Responses to open-ended questions revealed that administrators were most interested in information pertinent to the goals of their individual agency.

A ranking of the categories of information of interest to the administrators as a group is presented in Table 2. The information which was of greatest interest concerned identification of risk groups and mental health needs (i.e., gaps between problem and resources). The information which was of least interest concerned characteristics of the inter-agency network such as service duplication, agency characteristics, and overused resources.

Insert Table 2 about here

Ability and willingness to use information. Seven hypothetical findings that could emerge from a needs assessment were presented to

each administrator. They were asked both what action they would be able to take given available resources, and what action they would be willing to take, given available resources and agency values. In general, the responses to these two questions were similar, and thus will be considered together.

Administrators as a group were remarkably consistent in their responses. They generally indicated that the results would not substantially influence their current service delivery patterns. In those cases where the data provided support for current service delivery patterns, the most common response was to expand existing services. In those cases where the data provided information that was inconsistent with current service delivery patterns, the most common response was to discount the information or seek out additional information. Needs assessment data were not viewed as means of evaluating and redirecting existing services and resources by the administrators.

Attitudes towards a future needs assessment. The majority of the administrators reported conditional support for a future mental health needs assessment. Their comments indicated that support would depend on the competency and objectivity of those conducting the assessment, whether the assessment would be used to help rather than hinder agencies, and whether an assessment was actually needed at that time. The administrators also indicated a desire to be more actively involved in both the planning and implementation of any future needs assessments.

Director[1]

In terms of information desired, the director viewed "any valid data" as useful for the board's functioning. Thus, high ratings were given to all types of information.

In the area of ability to use information, two types of responses emerged. When the information indicated a gap between needs and services, the director recommended an increase in funding for services which would meet that need. In contrast, when the information indicated that adequate services were being provided, the director recommended a reallocation of resources.

The director reported a highly positive attitude towards future needs assessments. His major concerns regarding future assessments focussed on the efficiency of the assessment process in terms of time and cost. He also expressed a concern that the resulting data accurately reflect the community needs.

When the director's responses are compared with agencies' responses, several major differences emerge. First, the director's attitude towards the usefulness of information, and his opinions regarding ability to use information, reflected a community wide view of mental health needs, i.e., needs with highest priority would receive additional funding. This contrasted with agency views, which focussed more specifically on those mental health problems served by their agency.

Secondly, the directors' attitude toward needs assessment reflected concern for an adequate methodology for assessing mental health needs. The director was not concerned with the agencies' attitudes towards the needs assessment process. In contrast, the agencies past experience with needs assessment resulted in a lack of confidence that needs assessment would provide useful information for planning.

Conclusions and Implications

Agency administrators viewed assessment data primarily as a means of

justifying existing services and of obtaining funds for the expansion of services. Information was not viewed as a means of evaluating and redirecting existing services and resources. Barriers to the constructive use of assessment information were clearly evident. These barriers included: defensiveness, a lack of understanding of what the data meant, and a challenging of data which were not consistent with current agency resources and interests.

The director of the 648 Board, on the other hand, viewed the needs assessment process as an integral part of mental health planning. The difference in attitudes between the agency administrators and the 648 director appeared to reflect a more basic tension between these groups. The administrators were concerned primarily with the survival of their agencies. The director saw his role as one of stimulating needed services rather than agency growth. It was our judgment that a needs assessment conducted within this atmosphere would be counter-productive; possibly serving as the battle ground for fundamental tension within the system rather than as a basis for sound mental health planning.

Information obtained from the need for a needs assessment study contributed to recommendations to postpone a new needs assessment study. Instead, it was suggested to the director of the mental health board that educative and communicative interventions be implemented through involvement of the community mental health agencies in the integration of information yielded by a prior needs assessment. These recommendations were accepted, and a consultation contract negotiated.

The present study resulted in the identification of several barriers to effective utilization of needs assessment data prior to the implemen-

tation of an actual needs assessment. This process led to specific ameliorative strategies to enhance the climate for needs assessment. In this sense, assessing the need for a needs assessment may have prevented a wasteful use of resources. More generally, the present study underscores the importance of a systematic and planful approach to selecting and implementing interventions appropriate to particular community problems.

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Footnote

[1]Data were not collected for the director of the 648 board on the dimensions of attitudes towards previous assessment, and ability to use information. These dimensions required the respondent to have knowledge of the community. The director had recently been hired, and was relatively unfamiliar with the community.

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Table 1

Item Ratings by the Five Agency Administrators*

Item	Agency A	B	C	D	E
Knowledge of prior assessment	+	+	-	-	-
Utility of information	+	-	+	-	-
Degree to which needs have changed	+	+	-	-	-
Attitude towards future needs assessment	+	+	-	-	-
Information desired					
Populations currently experiencing problems	+	+	-	+	+
Populations at risk	+	+	+	+	+
Resourceful individuals	+	+	-	+	+
Mental health problems	+	+	-	+	-
Services and resources	+	+	+	+	-
Mental health needs	+	+	+	+	-
Agency characteristics	+	-	-	-	-
Underused resources	+	-	+	+	+
Overused resources	-	+	+	-	-
Service duplication	-	+	+	-	-
Service continuity and integration	+	+	+	+	-
Agency contact	+	+	+	+	-
Use and perception of resources by peer agencies	+	+	+	+	+

*Ratings of 3, 4, or 5 were assigned a +, ratings of 1 or 2 were assigned a -. This procedure was used to highlight patterns of responding.

Table 2

A Rank Ordering of Categories of Information Desired Based on Ratings* of the Agencies as a Group

Category	Rank	$\bar{X}$ Rating	S.D.
High risk populations	1	4.3	.67
Mental health needs	2	4.1	1.52
Services and resources	3	4.0	1.73
Resourceful individuals	4	3.9	1.25
Populations currently experiencing problems	5	3.7	1.64
Service continuity and integration	5	3.7	1.10
Underused resources	7	3.6	1.34
Use and perception of resources by peer agencies	7	3.6	.55
Contact between agencies	9	3.2	1.30
Mental health problems	10	2.8	1.79
Service duplication	11	2.4	1.14
Agency characteristics	12	2.2	.57
Overused resources	13	2.0	1.00

*Ratings made on a one to five scale of not useful to very useful to agency.